

Electronic Filing System (EFS) Data  
Electronic Patent Application Submission  
USPTO Use Only

EFS ID: 16829  
Application ID: 10064628  
Title of Invention: TEMPORAL IMAGE COMPARISON  
METHOD  
First Named Inventor: Gopal Avinash  
Domestic/Foreign Application: Domestic Application  
Filing Date: null  
Effective Receipt Date: 2002-07-31  
Submission Type: Utility Patent Filing  
Filing Type: new-utility  
Confirmation Number: 0  
Attorney Docket Number: GEMS0148PUS  
Digital Certificate Holder: cn=John A. Artz, ou=Registered Attorneys, ou=Patent and  
Trademark Office, ou=Department of Commerce, o=U.S.  
Government, c=US  
Certificate Message Digest: KtROnnVBnwcaG16cTCmvzQ==  
Total Fees Authorized: \$780.0  
Payment Category: DA – Deposit Account  
Deposit Account Number: 500476  
Deposit Account Name: John A. Artz



## TRANSMITTAL FORM



Electronic Version 1.0.3

Stylesheet Version: 1.0

Submission Type: Utility  
Patent FilingAttorney Docket  
Number:

GEMS0148PUS

**TEMPORAL IMAGE COMPARISON  
METHOD**

First Named Inventor: Gopal B. Avinash

## SUBMITTED BY

Name:	Mr. John A. Artz
Registration Number:	25824
Electronic Signature Mark: John A. Artz	Date Signed: 20020731

*I certify that the use of this system is for OFFICIAL correspondence between patent applicants or their representatives and the USPTO. Fraudulent or other use besides the filing of official correspondence by authorized parties is strictly prohibited, and subject to a fine and/or imprisonment under applicable law.*

*I, the undersigned, certify that I have viewed a display of document(s) being electronically submitted to the United States Patent and Trademark Office, using either the USPTO provided style sheet or software, and that this is the document(s) I intend for initiation or further prosecution of a patent application noted in the submission. This document(s) will become part of the official electronic record at the USPTO.*

## Attached Files:

declaration	Declaration1.tif
declaration	Declaration2.tif
declaration	Declaration3.tif
declaration	Declaration4.tif

specification  
bibd-transmittal  
fee-transmittal  
patent-assignments

Specification.xml  
GEMS0148PUSapds.xml  
GEMS0148PUSfee.xml  
Assignment.xml

**Attached Image File(s):**

Declaration1.tif  
Declaration2.tif  
Declaration3.tif  
Declaration4.tif

Comments:

<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION</b> <b>(37 CFR 1.63)</b>  <input type="checkbox"/> Declaration Submitted with Initial Filing      OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	<b>Attorney Docket Number</b>	GEMS 0148 PUS
	<b>First Named Inventor</b>	Gopal B. Avinash
	<b>COMPLETE IF KNOWN</b>	
	<b>Application Number</b>	/ Applied For
	<b>Filing Date</b>	Herewith
	<b>Group Art Unit</b>	
	<b>Examiner Name</b>	

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD FOR TEMPORAL IMAGE COMPARISON

(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) [ ] as United States Application Number or PCT International

Application Number [ ] and was amended on (MM/DD/YYYY) [ ] (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20503.


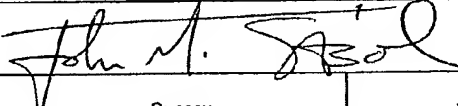
PTO/SB/01 (03-01)

Approved for use through 10/31/2002 OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

**DECLARATION — Utility or Design Patent Application**

Direct all correspondence to: <input type="checkbox"/>		Customer Number or Bar Code Label		OR <input checked="" type="checkbox"/> Correspondence address below	
Robert P. Renke					
Name					
Artz & Artz, P.C. 28333 Telegraph Rd., Ste. 250					
Address					
City Southfield			State MI		ZIP 48034
Country USA		Telephone (248) 223-9500		Fax (248) 223-9522	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SOLE OR FIRST INVENTOR :				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])			Family Name or Surname		
Gopal B.			Avinash		
Inventor's Signature				Date	
				7/8/2002	
Residence: City		State		Country	
New Berlin		WI		USA	
Citizenship		India			
Mailing Address					
4915 S. Radisson Court					
City		State		ZIP	
New Berlin		WI		53151	
Country		USA			
NAME OF SECOND INVENTOR:				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])			Family Name or Surname		
John M.			Sabol		
Inventor's Signature				Date	
				07/08/2002	
Residence: City		State		Country	
Sussex		WI		USA	
Citizenship		Canada			
Mailing Address					
N58 W24838 Cardinal Ct.					
City		State		ZIP	
Sussex		WI		53089-5024	
Country		USA			
<input type="checkbox"/> Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.					

[Page 2 of 2]

Please type a plus sign (+) inside this box → ☐

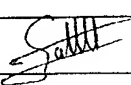
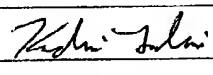
PTO/SB/02A (11-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

**DECLARATION****ADDITIONAL INVENTOR(S)**  
**Supplemental Sheet**  
Page 1 of 2

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Vianney Pierre		Battle	
Inventor's Signature 		Date 7/8/2002	
Residence: City Milwaukee	State WI	Country USA	Citizenship France
Mailing Address 1029 North Jackson Street			
Mailing Address			
City Milwaukee	State WI	ZIP 53202	Country USA
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Kadri Nizar		Jabri	
Inventor's Signature 		Date 7/8/02	
Residence: City Waukesha	State WI	Country USA	Citizenship Lebanon
Mailing Address 2833 N. University Drive, #201			
Mailing Address			
City Waukesha	State WI	ZIP 53188	Country USA
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box → ☐

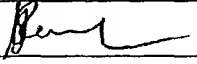
PTO/SB/02A (11-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

<b>DECLARATION</b>	<b>ADDITIONAL INVENTOR(S)</b> <b>Supplemental Sheet</b> Page <u>2</u> of <u>2</u>
--------------------	---

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Renuka		Uppaluri	
Inventor's Signature 		Date 07/10/02	
Residence: City	Pewaukee	State	WI
Country	USA	Citizenship	Indian
Mailing Address W271N5291 Orchard Lane			
Mailing Address			
City	Pewaukee	State	WI
ZIP	53072	Country	USA
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	
Country		Citizenship	
Mailing Address			
Mailing Address			
City		State	
ZIP		Country	
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	
Country		Citizenship	
Mailing Address			
Mailing Address			
City		State	
ZIP		Country	

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



# FEE TRANSMITTAL

Electronic Version 1.1.0

Stylesheet Version: 1.0

*Patent fees are subject to annual revisions on or about October 1st of each year.*

Large Entity

**TOTAL FEES AUTHORIZED: \$ 780**

The commissioner is hereby authorized to charge indicated processing and/or publication fees and credit any overpayments to:

Deposit Account Number: 50-0476  
 Deposit Account Name: John A. Artz, P.C.



Charge Any Additional Fee Required Under 37 C.F.R. Sections 1.16 and 1.17.

Charge Assignment Fees Required Under 37 C.F.R. Section 1.21 (h).

## SUBMITTED BY

Authorized Name: John A. Artz  
 Electronic Signature Mark: John A. Artz  
 Date Signed: 20020731

## BASIC FILING FEE

Fee Description	Fee Code	Fee Paid
Utility Filing Fee	101	\$ 740

Subtotal For Basic Filing Fee: \$ 740

## EXTRA CLAIM FEES

	Fee Code	Fee	Extra Claims	Fee Paid
Total Claims: 20	103	\$ 18	0	\$ 0
Independent Claims: 3	102	\$ 84	0	\$ 0

Subtotal For Extra Claims Fees: \$ 0

## ADDITIONAL FEES

Fee Description	Number	Quantity	Fee Code	Amount	Fee Paid
Recording Each Patent Assignment Per Property Fee	00000000	1	581	\$ 40	\$ 40

Subtotal For Additional Fees: \$ 40